PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)				Docket Number (Optional)	
FY 2009 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)				020366-092600US	
Application Number 10/681,530				Filed October 8, 2003	
ог	SYSTEMS	AND METHODS FOR LOCATION BA	SED IMAGE TELEG	RAPHY	
Art Unit 2621			Examiner David J. Czekaj		
	is a request cation.	t under the provisions of 37 CFR 1.136	(a) to extend the per	iod for filing a reply in	the above identified
The	requested e	xtension and fee are as follows (check	time period desired	and enter the approp	riate fee below):
			Fee	Small Entity Fee	2
	⊠ On	e month (37 CFR 1.17(a)(1))	\$130	\$65	\$ 130
	☐ Tw	o months (37 CFR 1.17(a)(2))	\$490	\$245	\$
	☐ Th	ree months (37 CFR 1.17(a)(3))	\$1110	\$555	\$
	☐ Fo	ur months (37 CFR 1.17(a)(4))	\$1730	\$865	\$
	☐ Fiv	re months (37 CFR 1.17(a)(5))	\$2350	\$1175	\$
	Applicant claims small entity status. See 37 CFR 1.27.				
	A check in the amount of the fee is enclosed.				
	Payment by credit card. Form PTO-2038 is attached.				
\boxtimes	The Director has already been authorized to charge fees in this application to a Deposit Account.				
\boxtimes	The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 20-1430				
	WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.				
I am the applicant/inventor.		applicant/inventor.			
		assignee of record of the entire Statement under 37 CFR 3			
		attorney or agent of record. Re	gistration Number _	61,751	
		attorney or agent under 37 CFF Registration number if acting u			_
	/Daniel J. Sherwinter/			May 6, 2010	
		Signature	t	Date	
	Daniel J. Sherwinter, Reg. No. 61,751 Typed or printed name			303-571-4000 Telephone Number	
NOT-					
		all the inventors or assignees of record of the enti ired, see below.	re interest or their represe	entative(s) are required. Su	bmit multiple forms if more th
	Total of	forms are	euhmittad		